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**CONFIRMATION NO. 5326**

<b>SERIAL NUMBER</b> 10/773,019	<b>FILING OR 371(c) DATE</b> 02/05/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> 18438/09050
<b>APPLICANTS</b> Michael Briggs, Shrewsbury, MA; Scott Hauser, St. Louis, MO; Richard Ornberg, Hayward, CA; Alane Koki, Marseille, FRANCE;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/451,885 03/04/2003				
<b>** FOREIGN APPLICATIONS *****</b> NONE				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 05/04/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged		STATE OR COUNTRY MA	SHEETS DRAWING 0	TOTAL CLAIMS 15 INDEPENDENT CLAIMS 5
Examiner's Signature		Initials		
<b>ADDRESS</b> 47376				
<b>TITLE</b> Treatment and prevention of obesity with COX-2 inhibitors alone or in combination with weight-loss agents				
<b>FILING FEE RECEIVED</b> 1072	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	